







Drug free Public Social Spaces

USAID-funded Drug Demand Reduction Program in Uzbekistan, Tajikistan, and the Ferghana Valley Region of Kyrgyzstan

DDRP BEST PRACTICE
COLLECTION

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DDRP best practice collection series:

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INTRODUCTION AND OVERVIEW

The USAID-funded Drug Demand Reduction Program (DDRP) aims to address social problems among vulnerable populations involved in or at risk of involvement in drug use in Central Asia. DDRP activities in Uzbekistan, Tajikistan and the Ferghana Valley Region of Kyrgyzstan are a response to the dramatic rise in opiate injection in the region.

The term "drug demand reduction" is used to describe policies or programs aimed at reducing the consumer demand for narcotic drugs and psychotropic substances covered by international drug control conventions [1]. The countries covered under this program have experienced significant increases in opiate consumption due to geography and recent socio-political events including the collapse of the Soviet Union and the Afghan conflict. Heroin transiting through these countries has created epidemics of drug use, undermining already fragile economies and threatening to overwhelm health systems with HIV. This has also occurred in other nearby former Soviet republics. DDRP's mission is to engage all levels of society in reducing demand for heroin and other opiates. The program began in 2002 and will cease in 2007.

The Drug Demand Reduction Program involves a network of leading international organizations active in HIV prevention and drug demand reduction in the region.

- The key components of DDRP are:
- educating target populations on drug-related issues
- promoting healthy lifestyles



- providing access to alternative occupational and leisure activities
- assisting in solving social problems
- supporting the development of pragmatic drug demand-reduction strategies at national and local levels.

This Drug free Public Social Spaces Model is one of ten developed under DDRP for replication and contribution to HIV and drug demand reduction policy and program development in the Central Asian region.

What is the DDRP Drug free Public Social Spaces Model?

DDRP implemented five Drug free Public Social Spaces projects, all in Tajikistan. These projects were targeted at disadvantaged communities with a high number of migrants. Several sites were visited to capture the experience of these projects. The lessons learned were distilled to produce this DDRP model.

- The DDRP Drug free Public Social Spaces Model addresses issues that have exacerbated community disadvantage and driven ever-increasing numbers of people in Central Asia toward crime, including drug-related crime. These issues include:
- Male economic migration to Kazakhstan, Russia and beyond leaving entire communities of female-headed households;
- Concentrations of rural to urban migrants on the edges of cities in the cheapest housing, where they become vulnerable to drug use, drug trafficking and HIV infection;
- Language, cultural and other differences, meaning they may not integrate easily into the surrounding community;
- Economic and social pressures contributing to low self-esteem, poor life skills and depression.

Across Central Asia, local community, government and religious leaders are increasingly recognizing the destructive impact of migration and poverty on their societies. The drug free public social spaces projects aimed to collaborate with communities to address these issues and the complex relationship of vulnerability to drug use and crime.

BENEFITS OF THE DRUG FREE PUBLIC SOCIAL SPACES MODEL

Drug free spaces led to significant benefits for individuals

Drug free space is a space where children can play with children and where adults and extended kinship networks can gather and interact. The In the face of many changes, the process of creating, participating, and maintaining a public space affords migrant families much needed "social capital" that builds stronger families, more closely knit networks of families, and more neighborliness and social governance.

creation of this drug free space serves as a platform for drug use prevention education. Through this phased intervention, a targeted group of adults, parents, migrant families, and mahallas, rather than being treated as fragmented populations needing separate or distinct interventions, are directly involved and collectively empowered to create a community level response to reducing drug demand.

The DDRP Drug free Public Social Spaces projects facilitated social contact among recent arrivals and their longer term urban-resident neighbors in a friendly atmosphere that combined social activities with drug demand reduction education. Each of these interventions focused on reducing the economic and emotional vulnerability of individual children, adolescents and parents to criminal activities including drug use. The drug free spaces aimed to create a common "drug free social space", which allowed local people to socialize, and combined drug demand reduction education with a variety of skills training and other activities.

Focus on migration related issues

The drug free spaces projects focused on migration: one of the most important and unrecognized influences on HIV and drug use risk. Rural-to-urban, cross-border, and male migration to Russia have disrupted once-strong traditional social structures across the region. The drug free spaces focused on female-headed rural to urban migrant households, including at-risk adoles-



Presentation of the DDRP Migrants Guide on drug demand reduction, Tajikistan

cents in these families. One of the drug free spaces was also able to access students, who had intentions to travel to Russia as illegal economic laborers, with drug demand reduction and HIV prevention information (for further information on DDRP projects for migrants, see DDRP Drug Demand Reduction and Referrals of Migrants model).

Unique access to difficult to reach vulnerable populations

The target population was difficult to reach. Female-headed households and their children were frequently socially isolated from their neighbors. This manifested in a lack of socializing between both adults and youth. In most sites, the children of newly arrived migrants exhibited poor school attendance and frequently fought with longer-term residents. Before the drug free public social spaces projects, both young people and families were effectively exclu-ded from their local neighborhoods, and inaccessible to other interventions. The DDRP projects provided access to these vulnerable populations, and identified and addressed many of the most urgent issues facing these groups.

Each project sought initially to open a dialogue between newly arrived and longer term residents. In each case the creation of a drug free social space was a tangible and achievable goal that required community cooperation to comp-lete. The completion of the project also required discussion of social problems including drug use and created social mixing aimed at building social capital.

Visible improvements to community infrastructure

The drug free spaces projects provided visible improvements to community infrastructure. In Chkalov and Dushanbe, particular care was taken to ensure appropriate recreational equipment was constructed for children and adolescents. Children could make use of swings and playground equipment, while adolescents could make use of basketball courts. In each case, tables



Basketball competition is one of the alternative activities for young people

and park benches for adult socialization complemented recreational equip-

ment. The projects thus provided equipment for all ages. In Dushanbe, the drug free spaces stimulated residents of surrounding apartments to clean and paint their buildings and to take greater pride in their neighborhood.

Catalysts for sustainable community activities

In Dushanbe, the project restored a community hall as well as an outdoor recreational area, providing a space where, as in a rural area, many families might gather together or to celebrate significant events. In Chkalov, the

The drug free spaces projects provided a focus for ongoing cooperation, as each outdoor recreational facility requires regular maintenance.

drug free spaces project became the site for ongoing sports competitions, extending the gains achieved through the initial impetus for social mixing. In Dushanbe, the National Taekwondo Federation undertook two projects in response to evident social problems and drug use among youth. The drug free spaces created interest from commercial sponsors and from the government officials. In each instance, the drug free spaces demonstrated that an innovative approach to drug demand reduction can catalyze further community action.

LITERATURE REVIEW

This is a brief literature review covering issues of vulnerability and drug demand reduction. It is an overview of the theoretical assumptions underpinning the individual projects within the DDRP Drug free Public Social Spaces Model.

Male migration

Male rural-to-urban and external migration to Russia affects Uzbekistan, Kyrgyzstan, and Tajikistan. Males leave behind responsibilities and a significant workload to female-headed households. Labor migration has also contributed to polygamy and divorces. The process has been accelerated by the outflow of the young, less conservative, more educated and mobile segment of the population [2]. Male economic migrants returning from Russia are locally regarded as the source of HIV and drug use. There is some evidence for this from the academic literature, at least in Tajikistan [3].

Risk and protective factors in drug demand reduction

In the adolescent mental health literature, the likelihood an individual will abuse drugs is ascribed to their childhood experiences across a number of potential sources of influence, or domains. Interventions should focus on domains including the individual, family, peers, school, community and the broader social environment [4]. Similarly, drug demand reduction interventions focus on addressing the risk and protective factors present in a specific situation. Risk factors include social and economic disadvantage, unemployment, changing social controls and values as well as failing education and health systems [5]. The intensity of interventions should reflect the local level of risk. Universal drug demand reduction interventions, for example, target all youth without identifying those at particularly high levels of risk. Selective interventions target those youth who are deemed more vulnerable to drug use because of personal, family and community risk factors. Indicated interventions are intensive efforts aimed at youth already using alcohol and other drugs and exhibiting other problem behaviors [6].

Evidence from HIV and injecting drug use literature suggests that interventions that focus exclusively on individual motivations and behavior

change are only partially effective [7,8]. Environmental approaches to drug demand reduction and HIV prevention suggest that individuals may have little control over their choices in engaging in high-risk behaviors. Interventions therefore need to include activities targeted at structural, community and individual levels [9,10]. For example, at the structural level, interventions need to consider issues such as policy, gender and marginalization of risk groups. At the community level, interventions need to address issues of power, community norms, social networks and social capital. At the individual level, interventions need to address issues such as literacy, socioeconomic status, agency and health seeking behavior.

Social capital

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There are several definitions of social capital. These include "the social structure which facilitates coordination and cooperation" [11]. Societies with high social capital are generally assumed to be advantaged. Social capital refers to informal structures with beneficial economic effects and other efforts of local residents to provide benefits to the community as a whole [12].

Social capital is assumed to create connections among individuals in three ways. First, the exchange of financial and non-monetary favors creates links of obligations. As those obligations are fulfilled, links of trust are created. Second, these social exchanges permit people to exchange information, which may help them with economic and other activities. Third, norms and rules within a community create pressures on individuals to behave in a socially desirable manner. Social capital thus brings benefits to individuals and to the neighborhood as a whole and, it is assumed, these benefits encourage people to maintain closer relationships [13]. The World Bank has undertaken extensive research into the relationship between social capital and development [14].

Studies have suggested that in Central Asia there are long-standing and strong community links forged through the fusion of Soviet and traditional social structures [15,16]. One such study found a particular reliance on informal social networks to achieve access to medical services, education, housing and employment in transitional countries [17]. However, migrants in transitional countries are especially vulnerable, through disruption of vital social networks. Migrants face special challenges of maintaining social

cohesion within their communities in exile as well as building links with local populations in an environment in which the structures that previously supported social capital are missing [18].

Social energy, shared community resources, and hashar

Social energy refers to the awakening of a community to an issue, and to the idea of beneficial collective action. Such an awakening may indicate the quality of local social capital and connections.

Potential triggers for such an event may result from a new need, or the work of a dynamic individual. However a social capital network in some form must already exist and appropriately motivated individuals are prerequisites for action to occur [19]. The combined effect of trust, networks, norms and reciprocity creates a strong community, with shared ownership over common resources owned by no one and used by all [20].

In Central Asia, *hashar*, a pre-Soviet form of collective voluntary work is a mechanism for mobilizing community assistance. Many donor projects in Central Asia require a contribution from the community toward costs of a project, and this has often been provided in the form of hashar, following consultation and agreement from local elders [21].

Drug demand reduction and social capital

Anti-drug coalitions have been successful mechanisms for communities to channel drug demand reduction efforts in the United States and elsewhere. Community activities have included modeling healthy behavior, the provision of drug free social spaces for youth, and changing community norms to create a culture that does not facilitate or endorse substance

abuse. Community coalitions commonly cooperate with representatives from religious organizations, schools, medical and drug treatment services, businesses, public housing departments, youth agencies and government [22].

Caution should be exercised in undertaking community anti-drug initiatives. Projects focused on correcting drug use behavior in communities may



Launching a new drug free public social space in Kulob, Tajikistan

serve to repel and increase stigmatization of individual drug users. Drug demand reduction projects focused on building social capital can have unintended consequences. Active drug users may be marginalized and social capital in this target group undermined [23,24].

Collaboration with local authorities

Maintaining good relationships with local authorities is crucial to drug demand reduction project success. Without the support of locally elected officials it is difficult to obtain permission from police or medical services to work with groups such as sex workers and active drug users. Projects focused on structuring leisure time are popular with local administrations. In supporting such projects, local governments can demonstrate their participation in drug demand reduction without political risk.

INDIVIDUAL PROJECT DESCRIPTIONS

This section provides an overview of four Tajikistan sites reviewed for the DDRP Drug free Public Social Spaces Model development process:

- National Taekwondo Federation, Dushanbe
- NGO DARK, Chkalov, Sughd province
- NGO Tashabbuskor, Mastchoh district, Sughd province
- Taekwondo Club Pamir, Khorugh, Mountainous Badakhshon Autonomous province

National Taekwondo Federation, Dushanbe, Tajikistan

Dushanbe is the capital of Tajikistan with a population of 619,400 (as of 2004.) The city was badly damaged from 1992-97 during the country's civil war. The Taekwondo National Federation (TNF) manages a successful sports complex for men and women in downtown Dushanbe. However the Federation was aware that many families could not afford to bring their children to the center and wished to offer the benefits of participation in sports to disadvantaged youth.

The TNF initially approached parents living in residential areas where the projects were to be built. There was little interest in the project at first from the local city administrations, or *bukumats*. Following persistent advocacy, the TNF succeeded in mobilizing the local communities where the projects were to be located, and obtained permission from the hukumat to establish two drug free social spaces.

In 2004, the Federation applied for DDRP funding to strengthen social protection of rural-to-urban migrants living in remote communities of Dushanbe from drug use by providing an enabling environment for their social integration and healthy alternatives to drug use. Two sports fields were constructed and a series of drug demand reduction seminars were held. The TNF undertook the construction of the two sports fields, seeing it as an opportunity to apply their expertise to resolving drug-related social issues in Dushanbe.

The following activities were undertaken by the Taekwondo National Federation:

- Playground and sports equipment were built at each site. Basketball, volleyball, soccer and gymnastics facilities, including nets, swings, bars, horizontal bars, Swedish drill and swing and goal posts, were installed. A nearby swimming pool was also repaired.
- New park benches and tables surrounding the play areas were constructed for parents. This was seen as a mechanism to encourage mixing between long-term residents and recent arrivals in the city. Prior to the project, long-term residents would make use of the existing tables and benches to play chess and backgammon, drink tea and have meals. However, new residents were excluded from this social interaction. Migrants would most frequently arrive home from the markets with their shopping and sit inside, and thus there would be no contact between the two groups.
- Repair of the local hall. A disused hall at the project site was renovated. Prior to the renovation, events among migrants were conducted in individual apartments and few people were invited. Following the DDRP project, the community hall is increasingly used as a gathering point, and families make a conscious effort to extend personal face-to-face invitations to neighbors

s equipment e. Basketball, ymnastics faswings, bars, ish drill and

Drug free public social space in Dushanbe, Taiikistan

- for the events.
- Mobilization of the local community to participate in the construction effort strengthened the relations between long-term residents and migrants, and thus facilitated the process of migrants' integration to the new social environment. Currently, community members, especially youth, spend most of their leisure time in the drug free space. During the construction and renovations, the entire neighborhood helped to create the public space.
- Drug demand reduction seminars were held for the local community.
 A total of 208 people, including children, adolescents and adults attended these seminars. DDRP partner Accord provided assistance and materials from their Street Choices program, including interactive discussions based on the animated videos.

The drug free space built by the Taekwondo National Federation in Dushanbe attracted many organizations, in particular the National Olympic Committee of Tajikistan, which in collaboration with a Russian commercial company will build four more such drug free spaces in Dushanbe.

NGO DARK, Chkalov, Tajikistan

Chkalov is a city of 22,000 people in northern Tajikistan. It lies 20 km from Khujand, the administrative capital and major city in Sughd province. After the Tajik civil war, many rural migrants came to Khujand and Chkalov in search of employment. Many migrants settled on the edge of Chkalov in Noviy Rayon, the New District. It is an area of apartments with no sports or recreational facilities. Noviy Rayon has high levels of crime, fights and drug dealing as well as



Migrants' children at the opening ceremony of the new drug free public social space, Tajikistan

a large influx of rural youth, who are regarded as being "especially vulnerable to the "many potential seductions associated with cities." It is populated largely by female-headed families, who find it difficult to control their teenage children.

NGO DARK had previously administered donor grants, including a successful reconstruction of a similar sports field in another part of Chkalov. DARK maintained good relationships with local police, parents, and the city administration. The Noviy Rayon sports field aimed to provide an opportunity for recent migrants and long-term residents to make joint decisions about a new community



DDRP drug demand reduction seminar for migrants, Tajikistan

resource and discuss the issue of youth drug use.

- Two activities, drug demand reduction seminars and the construction of a sports field, were selected as mechanisms to bring local parents together:
- Drug demand reduction seminars were held in individual apartments. A four-seminar series attracted a total of more than 150 people. In the course of the seminars, it was found that people who participated might earlier have recognized each other but had never spoken. The apartment seminars allowed different individuals to sit together and talk freely about their lives. Following the apartment seminars, individuals were invited to attend further seminars at DARK. Members of the local community resolved issues associated with construction of the sports field through this series of seminars.
- During the construction of the sports field, NGO DARK collaborated closely with leaders of the city mahalla and hukumat. Members of the local community contributed their time and energy to make the project a success. The head of the local mahalla took the drug free space built by NGO Dark under his supervision and protection.

During the project implementation, DARK collaborated with DDRP's partner organization Accord to offer the Street Choices and Street Business Toolkit programs, aimed at providing young people with knowledge and skills to make decisions for healthy choices and behavior (See the DDRP Youth Positive Development model for further information).

NGO Tashabbuskor, Mastchoh district, Tajikistan

NGO Tashabbuskor is located in Mastchoh district, Sughd province, near the Uzbek border in northern Tajikistan on the main road between Khujand and Tashkent. The project was undertaken at School No. 29 of Komsomolskaya Ploshchadka village. Inhabitants of the district speak Tajik, Uzbek, and Russian. There is a large number of young people living there (70 percent of the population is 35 years old or younger). The village is 26 km from the district center and there were no youth recreational facilities prior to the DDRP project.

The drug free space project in Mastchoh aimed to provide drug demand reduction and healthy alternatives to local youth living in the village and surrounding district. In 2004, NGO Tashbbuskor received a DDRP grant for construction of a sports field as well as advocacy activities, a public awareness campaign and drug demand reduction education for members of the local communities.

The following activities were undertaken by NGO Tashabbuskor:

- The project provided drug demand reduction education for local young people. While conducting sessions on the theme "Sports Against Drugs", a former drug user and successful locally-born sports personality was invited to present a positive image of former drug users. This was intended to decrease stigma and discrimination toward drug users. Seminar topics included the dangers of drug use, including overdose, social difficulties and HIV. Community leaders, mahalla committee representatives and religious leaders were invited to the trainings and provided input into dis
 - cussions. In total, 12 such community discussions attracted 413 people.
- Mobilization of the community was important to the success of the project. A significant part of the work was voluntarily undertaken by the local community. Local entrepreneurs and a community organization provided construction machinery and food for project workers at no cost.



DDRP drug demand reduction seminar,

Taekwondo Club Pamir, Khorugh, Tajikistan

Khorugh is the capital of the Mountainous Badakhshon Autonomous province in the isolated Pamir region of southern Tajikistan, on the border with Afghanistan. Khorugh has a population of 28,000 (as of 2005) with some light industry as well as a university, several schools and hospitals. The Pamir region is almost inaccessible by road or plane for long periods of the year. Drug smuggling is common due to proximity with the Afghan border.

The drug free spaces project aimed to strengthen social protection of rural-to-urban migrants living in remote areas of Khorugh from involvement with drugs by providing an enabling environment for migrants' social integration and healthy alternatives to drug use. The project was undertaken in 2004. Pamir Club succeeded in community mobilization through the active involvement of key persons including mahalla committee representatives, informal youth leaders, leaders among long-term residents, and among migrants. Various bodies in the local administration, including the Youth Affairs Department, Physical Training and Sports Committee, AIDS Center and Drug Control Agency, each provided assistance and support.

The project included the following activities:

- Drug demand reduction seminars: Pamir Club sports trainers conducted drug demand reduction seminars separately for 227 adults and adolescents. These seminars included discussions about drugs, consequences of drug use, drug use prevention methods, community activities, and input from formal and informal leaders on drug use prevention.
- Development of a drug free social space in a neighborhood close to the regional hospital: The sports field was equipped with volleyball and basketball facilities, tables for chess and checkers, swings and other sports equipment.
- Integration of migrants into the urban community: This was reflected in the composition of sports teams. Whereas teams had previously consisted of "urban residents" versus "recent migrants", teams are now based on place of residence.

LESSONS LEARNED

This section of the DDRP Drug free Public Social Spaces Model provides an overview of general recommendations and lessons learned. The information in this section serves two purposes. First, it provides a broad project plan or protocol for other organizations seeking to implement drug demand reduction projects in Central Asia. Second, it attempts to capture the best practices observed during the project review process, which might serve as a guide for similar projects in the region.

Pre-project planning

The following points should be considered when planning projects targeted at vulnerable communities in Central Asia:

The selection of a place for building a drug free space should be on a competitive basis through advertisements in newspapers to attract local community interest and through analysis from a recognized research company of available data about the number of migrants in each district.

The characteristics of the target group should be clearly defined to ensure effective project implementation and monito-ring of outcomes. All the DDRP Drug free Public Social Spaces projects in Tajikistan focused on the social integration of rural-to-urban migrants. The civil war did not affect the country evenly. Research to identify the province from which mig-rants come, their ethnicity, and the extent of migration to the target project site will assist in project planning.

A good understanding of the target city is important in order to reach the target population. Areas of disadvantage, high migrant populations and drug dealing should all be considered. These are likely to be at the edges of cities. Proximity to large markets and transport routes should also be considered as sites of risk. The DDRP Drug free Public Social Spaces projects specifically targeted areas with large numbers of migrants. Areas selected for these projects included those with



Childrens at the playground of the drug free public social space, Dushanbe, Tajikistan

a high concentration of recent rural-to urban-migrants on the outskirts of cities. Residential areas with a high concentration of schools, minimal recreational facilities and nearby markets were noted as being areas associated with large numbers of at-risk families in Dushanbe.

The languages spoken in the target group must be determined. The borders between Central Asian countries do not correspond to ethnic and language groups. Age is an additional influence on language. The interplay between age, ethnicity and migration can produce unexpected patterns of language use and literacy. The needs of the target group need to be balanced against official government language policies, and sensitivity toward the use of the national language must be considered. This may mean planning for appropriate staff and making materials available in more than one language.

Planning for drug free social spaces should incorporate at least four stages. First, local leaders of the government administration, police, and health authori-ties should be engaged. Second, the community should be engaged through seminar-based needs assessments. Third, project implementation should be undertaken. Lastly, the project should incorporate long-term maintenance and sustainability and engage the local community in these processes.

When approaching local administrations, migrant issues should be framed in clear terms of assisting the development of relationships among local long-term residents and migrants as well as reducing the risk of drug use and HIV. The absence of drug demand reduction and reproductive health education from local school curricula may require further attention. In addition, the *starshina* in each building should be approached. (A *starshina* is the building "elder", and this person frequently has good contacts and brings these to bear on projects.) Successful projects reflect positively on local political leaders. Drug free spaces projects can create an interest in commercial and government sponsorship and replication.

Potential private sponsors should be sought for project, to enhance their sustainability. Although the per-capita income in Tajikistan is low, there are a number of individual organizations and sponsors that have sufficient funds and want to assist in addressing social difficulties. This was noted in both rural and urban regions of Tajikistan.

The weather in Central Asia is extreme. Weather effects should be considered when planning the long-term maintenance and sustainability of outdoor sports equipment. Outdoor sports fields for adolescent males,

such as basketball courts, become very hot, dusty and unusable during the Central Asian summers other than in the evenings, when water is sprayed on the ground. Similarly, playgrounds may become unusable during the winter months due to the effects of weather, including holes from puddles. Ongoing maintenance of drug free social spaces is an opportunity for longer term discussion and building on social capital generated through projects. Traditional community mobilization, *bashar* (organized through community leaders), offers the potential for ensuring long-term maintenance of equipment supplied through projects.

A system of onward referrals, either for drug treatment, street business, or further involvement as a volunteer with local NGOs is integral to sustaining project effectiveness. This was particularly noted at NGO DARK, which used the DDRP project to engage with a local disadvantaged community. The NGO worked closely with NGO DINA and was able to refer individuals for a broad range of drug demand reduction services.

Stigma and discrimination against drug users and other vulnerable groups is very strong in Central Asia. In the planning phase, care should be taken to ensure drug free social spaces do not increase stigma and discrimination. This may involve consciously introducing antidiscrimination educational elements and linkage with appropriate referral services for current drug users.

Public events such as World AIDS Day are opportunities to collaborate with other organizations and raise the profile of projects among local government, community and religious leaders.

Grant process

Most projects surveyed had previous experience with target groups and donor projects. Implementation by an agency with existing projects may overcome administrative and bureaucratic barriers. For example, NGO DARK in Chkalov had extensive experience working with target populations, and was able to encourage individuals involved in the DDRP project to engage in street business and peer-to-peer training.

Project initiation

Roundtables with parents as well as local religious and community lea-ders introduced the project activities to local communities and also served to promote the projects. Word-of-mouth following project commencement was a particularly effective method of increasing enrollment in courses after earlier seminars and information sessions had been held. The importance of involving local informal youth leaders in the process was also noted in Khorugh. High-profile local sports personalities were involved early in the process by Tashabbuskor in Mastchoh.

Initial seminars in private apartments are useful to assist in determi-



DDRP roundtable discussion with local community leaders, Dushanbe, Tajikistan

ning community needs. This is the first stage of drug demand reduction seminars, involving 15-20 people at a time. In Chkalov, NGO DARK found these seminars were useful in providing referrals to further Street Business Toolkit seminars conducted by Accord at DARK offices. These seminars also encouraged open discussion between local residents who had never spoken. DARK noted that individuals who attend the initial seminar are more likely to be among the most motivated and frequently progress to working as volunteers and peer educators.

Support should be sought from other donors, NGOs, commercial sponsors and local authorities.

Service delivery

Information focused on drug demand reduction as well as drug free social space creation should be intermingled and delivered during a series of seminars. This allows word of mouth to spread among residents. This was a feature of all projects.

Community leaders should be invited to observe actual seminars and discuss issues with local residents. This should be undertaken in addition to initial roundtable discussions. These sessions should encourage local organizations to refer individuals to the subsequent seminars.

Specific recreational facilities should be prepared for each targeted age group and gender. For example, in Dushanbe, playground equipment was suitable for younger age groups, whereas adolescent males wanted basketball courts and weight training equipment. Parents may demand structured and supervised activities for adolescent females. This is particularly likely to be the case in smaller cities and rural areas.

Separate drug demand reduction and reproductive health seminars should be provided to males and females to encourage open discussion.

Mixed groups were initially trialed by NGO DARK in Chkalov, but were quickly stopped as adolescent females were unwilling to speak freely about drug use and reproductive health. The videos and accompanying interactive teaching style were very popular with youth at all sites surveyed.

Community discussion forums can facilitate genuine social support networks among residents. Seminar role plays can assist individuals in real-life situations involving drug use. In Chkalov, a woman attending a seminar sought the opinion of the gathered residents. She sought and obtained reassurance from fellow residents that her



Drug free public social space after reconstruction, Khujand, Tajikistan

decision to leave her drug using partner was correct. She was happy that the group supported her decision.

Social exclusion from a mahalla can occur if a woman is found to be using drugs, HIV positive or engaged in sex work. Similarly, stigmatization of an entire family can occur if a male is found to be HIV positive or to be a drug user. Migrants are frequently concerned about revealing their drug use status as it may result in their deportation. Anonymity is thus especially important.

Disadvantaged migrants may find themselves living in larger cities without authorization. This may result in these households not wishing to engage with public projects. Initial assistance in obtaining a document showing internal residency registration, or *propiska*, may be required as a trust-building measure.

Re-design of public spaces should facilitate social mixing of both parents and children. Local parental involvement should also form part of the project. The climate in Central Asia allows for sitting outdoors much of the year. This encoura-ges mixing of parents and children and builds the feeling that children are safe outdoors. Tables and benches constructed as part of projects can encourage long-term social interaction after the initial construction phase. This was found to be the case in Chkalov and Dushanbe.

Monitoring and evaluation

The DDRP Unique Identifier Code (UIC) was used at all sites surveyed. Initial difficulties were noted, but as the UIC was refined, the perceived compliance burden was reduced for most organizations surveyed. (For more information, see the Unique Identifier Code Model in this series). The involvement of social research organizations in implementing the UIC can be an opportunity to provide more general advice about project management. This was frequently provided by the organization Panorama in Tajikistan.

Baseline behavioral surveys of knowledge, attitudes and behavior (KAB) were undertaken on most projects to assess progress on drug demand reduction measures. This should be undertaken on all projects where feasible. Decreased conflict between recently arrived youths and long-term resident youth should be used as an indicator of project success. Decreased levels of conflict were noted in the Chkalov and Khorugh DDRP drug free spaces projects.

Staff training and capacity building

Staff in each organization received training in the principles associated with drug demand reduction at the commencement of the project. Additional training was provided throughout the project in drug demand reduction principles most relevant to their target group. Staff and volunteer training served a valuable function in facilitating the development of inter-organizational referral networks and information sha-ring among recipients.



Training delivering for volunteers on drug demand reduction issues

Well-established local NGOs frequently provided capacity building assistance for smaller NGOs. For example, NGO DARK collaborated closely with Khujand-based NGO DINA in capacity building and referrals: e.g. referrals of at-risk youth for training in Street Business Toolkit program.

REPLICATION

National Taekwondo Federation, Dushanbe, Tajikistan

Ongoing maintenance of equipment and a drug free space means that the community surrounding the sport fields will need to carry out regular repairs to playground equipment. An exit strategy is being negotiated with the residents, including a process for managing ongoing maintenance, painting and repairs.

NGO DARK, Chkalov, Tajikistan

Schools in disadvantaged areas with economic migration should be targeted for drug demand reduction education in future projects. Anecdotal improvements in local school attendance and parental control were noted after the project interventions.

Local projects provide an alternative to police interventions. In Noviy Rayon, NGO DARK reported increased referrals of youth from local police to DARK both during and after the project. DARK also reported that the local mayor offered to pave the drug free space after it had been completed, as he considered it to be a positive contribution to battling youth drug use in the city.

NGO Tashabbuskor, Mastchoh district, Tajikistan

In Mastchoh district, the hukumat ensured the sustainability of the drug free space by financing eight paid trainer and technical staff positions to oversee the activities and provide technical maintenance.

Taekwondo Club Pamir, Khorugh, Tajikistan

In Khorugh, both recently arrived and longer-term residents tended to form separate sports teams. Improved integration of migrants into the urban community was reflected in the progressive change in the composition of sports teams. This social mixing might serve as an indicator of improved relations between long-term residents and new resident communities when similar projects are implemented elsewhere.

GLOSSARY

Drug demand reduction: The term "drug demand reduction" is used to describe policies or programs directed towards reducing the consumer demand for narcotic drugs and psychotropic substances covered by the international drug control conventions (the Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol, the Convention on Psychotropic Substances of 1971 and the Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988). The distribution of these narcotic drugs and psychotropic substances is forbidden by law or limited to medical and pharmaceutical channels [25].

Hashar: A pre-Soviet form of collective voluntary work

Hukumat: Local administration.

Mahalla: Traditional Central Asian local neighborhood structure with limited responsibilities for local affairs including family welfare and minor disputes.

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